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C O N F I D E N T I A L SECTION 01 OF 03 HONG KONG 001469

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TAGS: [PREL](#) [PGOV](#) [ECON](#) [KFLU](#) [AMED](#) [TBIO](#) [HK](#) [CH](#)
SUBJECT: SECRETARY CHERTOFF'S MEETING WITH HONG KONG
SECRETARY FOR HEALTH, WELFARE AND FOOD DR. YORK CHOW

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Classified By: Consul General James B. Cunningham. Reasons: 1.4 (b,d).

Summary

11. (C) On March 31, U.S. Department of Homeland Security Secretary Michael Chertoff met with Hong Kong Secretary for

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Health, Welfare and Food (SHWF) Dr. York Chow. They discussed Hong Kong's preparations for a possible Avian Influenza (AI) pandemic, AI-related border issues, international cooperation on AI, and the need for governments to remain transparent with AI information. Chow briefed Secretary Chertoff on the Hong Kong Government's (HKG) past

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experience with AI as well as recent steps it has taken to deal with the resurgence of AI. Chow did not think an AI outbreak would originate in Hong Kong but was worried about AI entering from other places, especially from mainland China. On AI-related border issues, Chow said that temperature screening was a "symbolic" measure to reassure the public; he expected the first notice of a human AI case in Hong Kong would come from a hospital. Hong Kong regularly sends its public health officials to countries and territories needing assistance with AI efforts and brought up the need to provide more aid to areas that lacked basic medical and scientific infrastructure. Chow agreed with Secretary Chertoff on the need for governments to remain

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transparent about new AI developments and acknowledged that mainland China needed a greater degree of transparency on public health information. End summary.

Overview of AI Preparedness in Hong Kong

12. (C) On March 31, Homeland Security Secretary Michael Chertoff met with Hong Kong's Secretary for Health, Welfare and Food (SHWF), Dr. York Chow. Chow was accompanied by

Director of Health Dr. P.Y. Lam, Deputy Secretary for Food and Environmental Hygiene Eddy Chan, and Assistant Secretary for Health Howard Lee. The SHWF began his briefing by noting that AI was first discovered in Hong Kong in 1997 at the Queen Elizabeth Hospital while he was Chief Executive of the hospital. He continued that AI is not a human virus yet but resides mostly in reservoirs such as waterfowl, which is why no duck or goose farms are permitted in Hong Kong, and no imports of live ducks or geese are allowed. Chickens usually have very visible outbreaks, but there is now evidence that chickens can also carry the AI virus without showing symptoms and thus act as reservoirs for the virus.

13. (C) There were two previous outbreaks in Hong Kong, in 1997 and in 2003. As a result, all chickens in Hong Kong, whether locally raised or imported, are now vaccinated. Until recently, 30,000 locally raised live chickens and 30,000 imported live chickens were put on sale in Hong Kong every day, accounting for about 50% of the chicken consumed in Hong Kong. As a result of this love for freshly slaughtered chicken, Chow ruefully commented, the HKG's proposal to set up a central slaughtering house was "driving people to riot." The H2N2 poultry vaccine used by Hong Kong poultry farms, and by farms in Guangdong Province exporting to Hong Kong, seems to be effective. Although the Guangdong Provincial Government has decreed that all chickens in the province must be vaccinated, Chow doubted whether it was possible to vaccinate all of the 1 billion estimated chickens in Guangdong province. All of the chickens imported into Hong Kong, however, should be fine.

14. (C) Secretary Chertoff said that compensation for major chicken culls was an important issue and asked what Hong Kong's policy was. Chow said that the HKG would compensate poultry farmers \$38 Hong Kong Dollars (approximately \$5 USD) per chicken but would only do so in the event of an actual AI outbreak in poultry.

Preparations for Human AI Cases

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15. (C) Chow said that a recent human AI case in Guangzhou had led to a temporary ban on all live chicken imports from the province. Backyard poultry farms have also been banned, so the likelihood of an AI outbreak in Hong Kong poultry farms is low. However, it would be impossible to prevent any human AI cases from showing up in Hong Kong, especially when dealing with people who have traveled to other countries. The key, said Chow, is to catch the first case and lower the chance of human-to-human transmission. After its experience with SARS, Hong Kong has set up a network of 14 hospitals that have 150 isolation rooms each, meaning that Hong Kong has 2,100 isolation rooms ready to deal with a pandemic disease outbreak at any time. As for other preparations, Chow said that Hong Kong holds "visible" drills more than once a year and is in the planning stages for a combined drill with mainland China.

16. (C) Besides drills, Chow also said that the HKG was conducting a wide ranging public information campaign on AI emphasizing personal hygiene and teaching the difference between AI and normal flu using radio, television, the internet, signs, and even classroom outreaches. The outreach efforts were timed to begin in October and November so that Hong Kong residents would be ready for the flu season in Hong Kong, which runs from January through March.

Antivirals and Vaccines

17. (C) Hong Kong has stocked enough Tamiflu to cover 20% of its population. Chow warned, however, that the difficult issue would be determining how the Tamiflu should be distributed. Hong Kong will give first priority to actual AI

patients, second priority to anyone who has any contact with an AI patient, and finally keep the rest of its Tamiflu in reserve to give to people running essential services in the event of a true pandemic situation. If Tamiflu is distributed too broadly, there is a risk that the AI virus will rapidly develop resistance to the antiviral medication. Chow said that Hong Kong is also conducting research on different antiviral medications but has not found anything as effective as Tamiflu.

¶18. (C) Chow suspected that current vaccines being developed around the world might not be effective against an actual AI outbreak. HKG labs as well as labs in Hong Kong University have received samples showing multiple genetic changes. The H5N1 AI virus recently discovered in wild birds in Hong Kong, for example, is considerably different from the H5N1 virus isolated in 1997. Many of the human AI vaccines that have been developed to this point are based upon old Vietnamese samples and may not work against the currently circulating forms of the H5N1 virus. In any case, he concluded, the time gap that exists between the formulation of a vaccine and the production of mass quantities of a vaccine is a major problem.

¶19. (C) Chow commented that Hong Kong is trying to attract pharmaceutical companies to come to Hong Kong to do more research, development, and production of innovative drugs. Secretary Chertoff pointed out that liability protection

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would be a key issue, and Chow responded that although insurance prices were high in Hong Kong he hoped the HKG would be able to help pharmaceutical companies overcome obstacles.

AI and Border Issues

¶10. (C) Secretary Chertoff asked Chow for his risk assessment of the current AI situation in the region. Chow replied that there are varying assessments on the actual threat posed by AI. Some experts want more research funds and use scare tactics to achieve their ends, whereas some experts are very complacent. Hong Kong will prepare for a medium threat scenario in which an AI outbreak occurs but is manageable. If a true disaster strikes, said Chow, there won't be much that the HKG can do in any case. The best thing to do is try

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to prevent the pandemic from happening, an effort that may largely depend upon carefully watching Hong Kong's borders.

¶11. (C) Chow pointed to Hong Kong's land border with mainland China, through which over 300,000 people enter or exit Hong Kong day, as the area of greatest risk. Although Hong Kong has instituted temperature checking since the SARS epidemic, against AI temperature screening is a largely symbolic gesture. On the other hand, AI symptoms are so much more severe than normal flu symptoms that AI patients will almost certainly end up in one of Hong Kong's hospitals, where the case will be detected and reported. Since it is not realistic to expect that the first human AI case will be caught at the border, Hong Kong must focus on tightening border controls after the discovery of the first AI case traveling into the territory.

¶12. (C) Director of Health Dr. P.Y. Lam said that when Hong Kong first started temperature screening in 2003 during the SARS epidemic, the main impetus behind the move was to screen outgoing travelers to avoid "exporting" SARS cases out of Hong Kong. Chow reassured the Secretary that even though Hong Kong would strive not to "export" cases in the event of an AI outbreak in Hong Kong, as long as the U.S. had set up screening and quarantine facilities in U.S. ports of entry the HKG would most likely allow U.S. citizens in Hong Kong to return home.

International Cooperation on AI

¶13. (C) Secretary Chertoff said that since AI infected people can be infectious for between 24-48 hours before showing symptoms, the U.S. will put a great deal of emphasis on screening travelers based on their travel history. Chow agreed with the Secretary and said that the best way to react to an actual AI outbreak that showed efficient human-to-human transmission would be to encircle the affected area and inject massive amounts of resources into the area. The Secretary pointed out that this would only be effective if

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countries were both willing and able to identify such an outbreak. Chow agreed and said that there is a great need to assist countries that do not have any labs or any other means to analyze an AI outbreak. In some countries hospitals will be reluctant to report AI cases that show up in their facilities out of fear that the report will drive away "business" for several months -- a situation that would not happen in Hong Kong with its publicly funded health care system. Chow asserted that he constantly tries to send his public health officials to other countries which need technical assistance with AI issues.

The Need for Transparency

¶14. (C) Secretary Chertoff emphasized to the SHWF that transparency and efficient communications were of the utmost importance in preparing for AI. Chow agreed and noted that the HKG had good communications with the Consulate, a point that Consul General Cunningham concurred with. Chow reassured the Secretary that he has told mainland Chinese officials that the HKG will not "hide anything" that it hears about. The HKG may wait "just a few hours" to let mainland Chinese officials go public with its information first, though. When asked by CG Cunningham whether the transparency situation had improved, Chow said that the Central Government was good but did not have complete control over local situations. Shenzhen, Guangzhou, and Guangdong Province overall are good, but other provinces are less dependable and may be burdened by inferior capabilities. In any case, said Chow, "we are telling mainland China that they need to be more transparent."

¶15. (U) Secretary Chertoff's party has cleared this cable. Cunningham